Express

A Bi-weekly Publication

Monday, March 17, 2003

Chronic Disease Self-Management Training Offers Coping Skills to Many

Pain and a reduced capacity to lead a full life often accompany chronic disease. Dealing with chronic disease and its discomforts and impediments was the topic of a recent educational series offered to employees of the Indiana State Department of Health (ISDH) to help them lead more productive and enjoyable lives with less pain and discomfort.

The series of classes offered to ISDH employees was an outgrowth of a much wider project that involved

training 46 Master Trainers who are working in their local jurisdictions across Indiana to assist local residents to apply chronic-disease self-management techniques.

"These Master Trainer trainees included representatives from many local health departments. A lot were from minority health coalitions, community health centers, people from hospitals, and at least one physician," said Laura Heinrich, the Diabetes Program coordinator who worked on the logistics of bringing the training to Indiana.

Issues addressed by the training in-

- □ learning to deal with frustration, fatigue, pain, and isolation
- \square using exercise to improve strength, flexibility, and endurance
- □ using medications appropriately
- □ communicating effectively with family, friends, and health professionals



CHRONIC DISEASE Self-Management Program trainers at ISDH include (I to r.) Laura Heinrich, diabetes program coordinator; Joyce Black, Diabetes Program director; Molly Maguire, Office of Women's Health; and Danielle Patterson, Office of Minority Health director. Photo by Daniel Axler

□ reviewing the role of nutrition □ making informed treatment decisions

Staff of the team that conducted the recent training for ISDH employees included Heinrich, as well as Danielle Patterson, director of the ISDH Office of Minority Health; Joyce Black, director of the ISDH Diabetes Program; and Molly Maguire, ISDH Office of Women's Health.

These four ISDH "Master Trainers," received their training during a fourand-a-half-day intensive program offered to them and the 42 other trainees in September and October 2002.

To conduct that training, train-thetrainer staff flew in from Stanford University, where the course was developed and has been offered internationally in places like China and Australia.

Heinrich said, "Each of the Master Trainers has been equipped to conduct sessions for people with chronic disease, but they are also qualified to conduct master trainer training for leaders that in time will present the program to a lot of different enti-

"What they recommend is that, before master trainers train new master trainers, they actually conduct a few courses first," Heinrich added.

The participants in the train-the-trainer program held last fall are now getting their feet wet by conducting self-management training sessions across Indiana for people with chronic disease.

The classes for those with chronic diseases con-

sist of six classes, scheduled once per week for two-and-a-half hours each.

The comments of one of the trainees, Linda Buff, ISDH Financial Services, mirrors the sentiments of several others who received the self-management training. She says that sharing ideas and mutual encouragement by attendees was one of the most positive features of the program.

Participants were paired and called one another to offer encouragement with personalized action plans that each participant set for him or herself. "No one," Buff said, "was put down if action plan goals were not reached."

"The things described in the book are neat; they really work," she said. "The breathing exercises are really good. Basically, they help to relax you and control and relieve stress."

Buff said that her chronic asthmatic condition had limited her activities.

See SELF-MANAGEMENT - page 2

Distance Learning Offers Training 'Ops' on Demand

Significant changes in distance learning have been introduced at the ISDH Web site Learning Opportunities pages since the *Express* last reviewed offerings there.

Now, complete prerecorded video programs are available for viewing at the Web site. (Click here to go directly to the menu of offerings.)

These productions, created by the Indiana State Department of Health Office of Public Affairs, were previously telecast live over the Indiana Higher Education Telecommunica-

tions System (IHETS) to select audiences of public health and public safety officials, and to media workers who report on public health issues.

They are available on line as "Webstreamed" productions, that can be viewed at any time, whenever convenient.

The programs available address "hot" public health topics involving

About the Agency ■ Bioterrorism Indiana State Department of Health Regulatory Services Satellite Conference Schedule Health Information ■ (as of March 4, 2003) Publications Bioterrorism and the Media (ISDH) January 10, 2003. Crisis and Emergency Risk Public Health Programs■ Communication February 7, 2003 and other Archived Webcasts State Laboratories http://www.in.gov/isdh/bioterrorism/seminars.htm Health Care Links News Releases ISDH Smallpox Presentation for First Responders Jan 31, 2003_ Calendar Events http://www.in.gov/isdh/bioterrorism/smallpox/index.htm Birth & Death Certs. ISDH Home Page CDC Smallpox Presentation Dec 5 & 6, 2002 Archived Webcast Search ISDH http://www.phppo.cdc.gov/phtn/webcast/smallpox/default.asp Contact Us For information on many other Satellite Conferences and Web broadcasts, visit the Public Health Training Network (PHTN) Web site at http://www.phppo.cdc.gov/phtn/calendar.asp

LEARNING OPPORTUNITIES with 'new look' at www.in.gov/isdh/trainingop/

bioterrorism and related issues. They are:

- Crisis and Emergency Risk Communication, which runs approximately two hours
- Smallpox Seminar for First Responders, which is approximately an hour and a half in length, and

Bioterrorism and the Media, with a length of approximately two and a half hours.

The Learning Opportunities pages also continue to list upcoming live broadcasts, produced from distant locations external to ISDH.

Whenever an ISDH staff member expresses interest to Dennis Rediker, ISDH distance learning coordinator, he will schedule a viewing location and make arrangements for receiving

the broadcast.

For example, the upcoming videoconference to highlight folic acid research at Purdue University is scheduled for 11 a.m. on March 20.

To make a reservation to see this program and others in Indianapolis only requires a click on Learning Opportunities at the bottom of the opening Web page: at http://www.IN.gov/isdh.

SELF-MANAGEMENT - from page 1

Previously, Buff had to restrict activities with her grandchildren, due to her condition, which taxed her energy.

She said that an important thing she discovered was that by planning varied activities during visits with her grand-children, she could extend the time and enjoyment spent with them.

"Some activities, like playing board games, have permitted me to conserve my energy," she said.

The training is based on the textbook *Living a Healthy Life with Chronic Conditions*, which was distributed to each training participant. The text was developed by staff at the Stanford University School of Medicine. The book has been recently updated following a five-year study, with input from hundreds of persons with chronic health conditions.

The program will be offered to ISDH staff again starting in April.

Black History Month Encourages Staff Study

Throughout Black History Month in February, all Indiana State Department of Health employees had an opportunity to learn about significant contributions of African Americans in diverse fields of activity, including inventions, science, sports, early pioneers, and "movers and shakers" who have changed the way we think about our freedoms and democratic society. Important events that have shaped black history—and the history of all Americans—were also included.

New blocks of information appeared periodically throughout the month on the ISDH Intranet site.

March 13 was quiz day when all who dared were invited to test their memory and knowledge of the information posted during the previous month.

The competition started at the noon lunch break. Five rounds of questions later, a winner emerged—Linda Calvert, Human Resources, edged out last year's quiz winner, Barbara Lyles,

Maternal and Child Health. Cynthia Bryant was the winner at the ISDH Laboratories. Ouiz

Quiz QUIZ WINNER Linda Calvert questions

Photo by Daniel Axler

from the month-long postings included the following:

Rebecca J. Cole was the ____ United States Black woman physician.
a. 1st b. 4th c. 2nd

What year was the Civil Rights Act declared unconstitutional?

a. 1887 b. 1881 c. 1883

Name two African Americans who served as U.S. Surgeon General in the Clinton administration.

There would be no Chicago without me.
_____ a. Pounce de Leon b. Augustine
Lafayette c. Jean Baptiste Pointe DuSable

Answers: 1. c; 2. c; 3. M. Joycelyn Elders, M.D. and David Satcher, M.D.; 4. c.

The Bioterrorism Threat: Indiana Responds

Indiana Public Broadcasting Series Will Inform and Educate Hoosiers

Until now, the subject of nuclear, biological, or chemical warfare was only broached in a good science fiction novel or in an action-packed Hollywood motion picture. But today, in a post 9-11 world, the threat of bioterrorism is a harsh reality with which many Americans are quickly trying to come to terms.

"After September 11th, new priorities and challenges have tested the public health system in ways we never conceived," said State Health Commissioner Greg Wilson, M.D. "We believe that strengthening the public health infrastructure - which has been neglected throughout the nation for decades - is the best way to improve our response to bioterrorism."

As the issue of bioterrorism moves to



AN ISDH LAB TECHNICIAN demonstrates how an environmental sample is tested for anthrax.

Photo by Daniel Axler

the forefront of the minds of many Americans, Indiana's Public Broadcasting Stations are working to keep the people of Indiana educated and informed on these growing concerns. *The Bioterrorism Threat: Indiana Responds -* a collection of three compelling public broadcasting reports - will detail specific bioterrorism threats in Indiana, examine our preparedness for an attack, and outline the ways in which Hoosiers should respond in the event of an attack.

The series, which is being produced by Central Indiana Public Broadcasting (WFYI TV 20 / FM 90 - Indianapolis, WTIU-TV /WFIU Public Radio - Bloomington, and WIPB-TV/WBST Indiana Public Radio - Muncie) in collaboration with the Indiana State Department of

Health, will include two hour-long television broadcasts and one companion radio special.

INDIANA THE BIOTERRORISM THREAT RESPONDS

See the schedule at the end of this article for air dates and times for the week of April 13th for the first two installments of *The Bioterrorism Threat: Indiana Responds*. Veteran broadcaster Diane Willis will serve as host of the programs, which will assemble such leading Indiana bioterrorism experts as Dr.

Wilson; Peter Beering, Terrorism Preparedness Coordinator for Indianapolis; Dr. Virginia Caine, Director of the Marion County Health Department; John Clark, Hudson Institute Terrorism Expert; and Judith Myers-Walls, Associate Professor of Child Development and Family Studies at Purdue University.

Part One, which is entitled "Understanding the Threat," is designed to help viewers understand

the nature of terrorism through the use of biological, chemical, or radioactive weapons. The program will cover such hazards as anthrax, smallpox, botulism, and "dirty bombs," in addition to outlining the risks posed by nerve agents such as those in the Newport VX stockpile.

The special also explores the safety of Indiana's water and food supplies, and most importantly, the measures being taken by the Indiana State Department of Health, State Emergency Management Association (SEMA), and other state agencies to respond to bioterrorism attacks. As part of this broadcast, television journalist Phil Bremen will facilitate a question and answer session with a studio audience.

In Part Two, "First Responders," viewers will discover the efforts that are currently underway to train Indiana's firefighters, law enforcement officers, and public health workers to deal with potential bioterrorism threats. The program will spotlight several Indiana communities, including Bloomington, Lafayette, and Fort Wayne, where measures are underway to help protect citizens in the event of a biological, chemical, or nuclear attack.

The series will conclude with a live, two-hour public radio broadcast on Friday, April 25, scheduled from 2:00 - 4:00 p.m., EST, on all public radio stations in Indiana.

The broadcast will outline the dangers of nuclear, biological, and chemical warfare and provide Hoosiers with the kind of information they should know in the event of an attack. As part of this special report, listeners are encouraged to phone in their questions to the experts taking part in the broadcast.

The Bioterrorism Threat: Indiana Responds is being produced in partnership with the Indiana State Department of Health, through a grant from the Centers for Disease Control and Prevention. For more information on this special three-part series, visit the ISDH Web site at www.IN.gov/isdh (click here).

Broadcast Schedules* for The Bioterrorism Threat: Indiana Responds on Indiana's PBS Stations:

*local times Evansville WNIN (9) April 16 and 17. . 7-8 p.m. Ft. Wayne WFWA (39) April 13th. 6-8 p.m. Bloomington WTIU (30) April 16 and 17. . 8-9 p.m. South Bend WNIT (34) April 16 and 17. . 7-8 p.m. Merrillville Vincennes/ WYIN (56) April 18th 8-10 p.m. Terre Haute WVUT (22) April 19th 8-10 p.m. April 18 and 19. . 9-10 p.m. WIPB (49) Muncie Indianapolis WTBU (69) April 16 and 17. . 8-9 p.m. Indianapolis WFYI (20) April 16 and 17. . 8-9 p.m.; April 20. 2-4 p.m.



ISDH Administrative Staff Serve As 'Preceptors'

For those in pursuit of a Master of Public Health (MPH) degree, classroom education is not the only important part of the educational process. At the I.U. School of Public Health, each MPH student also gets to complete an internship. Over the past several years, four students at the I.U. Department of Public Health have chosen ISDH administrators as preceptors (teachers) to assist with work on their MPH internships.

Among the ISDH staff offering their services to the students, have been State Health Commissioner Greg Wilson, M.D.; Office of Policy Director Kathy Weaver, J.D., M.P.A., R.N.; Roland Gamache, Ph.D., M.B.A., C.Q.E., director of Public Health Preparedness; and Joyce Black, M.S., RD, CD, director of the Diabetes Prevention and Control Program.

One way of getting hands-on experience outside of the classroom to sharpen public health career skills and contribute in some substantive way to the field of public health is through the required internship project working with a seasoned public health professional.

Joan Henkle, who coordinates MPH internship placement at I.U., said, "The placements come about in a variety of ways. If I know what a student is looking for, I suggest making contact with specialists in their field of interest, or make a call myself to check on possible mentors and projects."

The Express asked all ISDH preceptors, identified above, to comment on the program and their involvement.

Dr. Wilson:

"Strengthening the public health infrastructure has been one of the most important priorities for the Indiana State Department of Health during the last year. One of the best ways to accomplish this is to support the training program for public health professionals at the Indiana University Department of Public Health.

"We have developed a strong interactive relationship with the staff of the Department of Public Health and are presently involved in a number of joint programs. We have been very enthusiastic about supporting students in the public health program.

"I am presently serving as mentor for Dr. William Groh, a cardiologist at Indiana University, who is participating in the Masters of Public Health program. Dr. Groh's project involves the development of cardiovascular guidelines in coordination with the One of the best ways to strengthen the public health infrastructure is to support the training program for public health professionals at the Indiana University Department of Public Health."

> State Health Commissioner GREG WILSON, M.D.

Chronic Disease Advisory Council. These guidelines will also be implemented through the Medicaid Chronic Disease Management program.

"This is an excellent example of the synergy that results from the partnership between the Indiana State Department of Health and the Indiana University."

Kathy Weaver:

"Jeff Kerner's MPH internship, involving legal research and policy development, led to the creation of a new ISDH program.

"The Health Care Professional Recruitment and Retention Fund had been authorized by an act of the General Assembly. The legislation allows Indiana to apply for federal funding to establish a health care professional student loan repayment program (SLRP) for physicians, nurses, dentists, nurse practitioners, and physician assistants agreeing to work in medically underserved areas or the nonprofit sector.

"Jeff's work assisted ISDH with the development of a detailed repayment program as an outgrowth of the legislation. His work on dual degrees from the Law School and the Master's in Public Health Program, made his internship a good fit.

"As the preceptor, I provided guidance in development of the internship experience. Together with Jeff, we periodically reviewed the status of his assigned project, followed later by midterm and final evaluations.

"Jeff's internship time was of great assistance in readying ISDH to implement the new program."

Joyce Black:

"The internship of Linda DiMeglio, M.D. is with the ISDH Diabetes Prevention and Control Program (DPCP). During her community project in the summer of 2001, her group developed a survey instrument to learn about the beliefs and practices of 700 Indiana primary care physicians regarding Type 1 and Type 2 diabetes in youth. Final analysis of the acquired information will enable the DPCP at ISDH to provide resources and technical assistance to the Indiana physicians who are diagnosing and treating persons with diabetes. She is also designing a 2nd survey assessing physician knowledge of guidelines for diabetes

"Both projects are intended to provide students with experience in the application of public health principles to real problems in the health field and an opportunity to apply their problem-solving skills. The agency plays a role in preparing the students for public health practice while receiving help for a specific project of value to the agency. The student/faculty support often provides a way for agencies to develop or complete a project that they would otherwise not have the resources to address."

Roland Gamache:

"MPH student Tess Weathers focused her internship on an analysis of the multiple cause of death files to establish a historic baseline for Indiana of mortality associated with selected birth defects of our residents. These studies will also allow a comparison of Indiana birth defects collected in the future, through the Indiana Birth Defects Surveillance System (IBDSS), with this established historic baseline.

"Tess also researched national trends and patterns of birth defect mortality to determine similarities and differences of this Indiana baseline data to national data. As an MPH intern, she was exposed to the type of work and data analysis that is part of the Epidemiology program in state health departments. In addition, her work provided a great source of information for future programs and studies related to birth defects in the state.

"As the State Department of Health continues to implement the IBDSS, Weathers' work with historic birth defects data will contribute further knowledge about the cause of birth defects and the use of state specific information to target needed prevention programs and services for Indiana residents."



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News Link

A Monthly Publication for Local Health Departments

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Crisis and Risk Communication Telecast Guides Spokespersons

During a bioterrorism crisis, a spokesperson can truly be on the firing line when addressing the media. A recent satellite telecast presented by the ISDH Office of Public Affairs provided local health department and hospital spokespersons with guidance from an internationally recognized expert in risk communications.

This Crisis and Emergency Risk Communication telecast was presented February 7 on the Indiana Higher Education Telecommunications System. The program was downlinked for viewers at 58 sites across the state.

A second live Crisis and Risk Communication telecast is planned for Friday, March 28. (See box on this page for more information.)

Both telecasts feature Vincent Covello, Ph.D., an educator, researcher, and expert on crisis and risk communications. Joining Dr. Covello for the Feb. 7 telecast were John Althardt, public relations coordinator with the Marion County Health Department, and John Meunier, a former news-

paper reporter who is now a doctoral student at Indiana University. The three took a roundtable approach to the topic, which included role-playing through crisis and risk communications scenarios, with Althardt in the role of spokesperson and the other panel members playing the role of reporters.



INTERNATIONALLY RECOGNIZED CRISIS COMMUNICATION EXPERT Vincent Covello, Ph.D. discusses tips and techniques for effective communication in high-stress situations during a statewide IHETS telecast to Indiana local health department and hospital personnel on February 7.



REALISTIC ROLE PLAY mirroring actual crisis communication is demonstrated during the telecast by John Althardt, public relations coordinator at the Marion County Health Department (left), John Meunier, a former newspaper reporter (center), and Vincent Covello. Althardt plays the spokesperson, while Meunier and Covello assume the roles of reporters.

Photos edited from video by Dennis Rediker

According to Fred Bagg, director of Community Relations & Marketing at St. Francis Hospitals and Health Centers in Indianapolis, the telecast offered valuable information. "I felt this was time well spent, both for myself and my staff," Bagg said. "Dr. Covello is adept at educating on crisis and risk commu-

nication and offered practical advice, even for those with years of experience in crisis communication."

According to Dr. Covello's research, the average electronic media story includes just a ninesecond spokesperson's quote. In newspaper stories. the average spokesperson's quote is approximately 27 words. That's why, in a crisis, a spokesperson's skill at conveying a particular message is crucial. Managing the delivery of that message allows a spokesperson to maximize the opportunity to educate and inform about important, often potentially life-saving, issues.

During the program, Dr. Covello gave tips on techniques for communicating in high-stress situations. He discussed research findings about how, when under stress, message recipients are able to receive only limited information and how to tailor communication with that in mind. He also shared models through which spokespersons can improve their messages' effectiveness in crisis settings.

SECOND CHANCE VIEWING

For local health department and hospital officials who missed the first Crisis and Risk Communication telecast with Dr. Vincent Covello, another opportunity is present on Friday, March 28, 1-3 p.m. when Dr. Covello returns for another live telecast on the IHETS network. Call Andy Zirkle for broadcast downlink site information: 317-233-7306.

MAPP Helps Communities to Find Their Way to Choose, Implement Healthy People 2010 Goals

Top down or bottom up?

Top down is the traditional way of initiating change, when leadership designs a plan and then expects people who will be served to rally in its support after learning how it works.

The trouble with this approach, according to the National Association of County and City Health Organizations (NACCHO), is that the people to be served may not buy into a plan if it fails to meet their pressing health needs. Such a situation is more likely when local residents or principal players are excluded from participating in the plan's formulation.

To build what they consider the most effective health planning model yet—what they call MAPP—NACCHO has developed a "bottom up" approach, where both the community's array of health serving entities and residents in a community are actively recruited to participate.

State Health Commissioner Greg Wilson, M.D. is enthusiastic about the MAPP approach.

"Public health must be implemented at the local level. MAPP integrates the entire community into a planning process that will improve the health of all citizens," Dr. Wilson said.

MAPP—short for Mobilizing for Action through Planning and Partnerships—"is a strategic planning tool for improving community health," and it's driven by community ownership.

Improving health is why the CDC is encouraging communities to set Healthy People 2010 achievement benchmarks. Using MAPP is a focused way to get there.

Jerry King, director of the Indiana Public Health Association, endorses MAPP goals that encompass "community participation which leads to collective thinking and ultimately, results in effective, sustainable solutions to complex problems."

The MAPP process brings diverse elements together to collaboratively determine the most effective way to conduct public health activities.

King believes that even for rural counties with both limited public health personnel and financial resources, head-

way is possible if goals are prioritized and are limited to match resources.

In Indiana, St. Joseph County Health Officer Janice Carson, M.D. has worked with a diverse coalition of local organizations and individuals to develop a plan using the MAPP process.



The process begins when a lead organization identifies and recruits partners, stakeholders, and community residents. In South Bend, the county health department started things rolling in 2001.

Dr. Carson says that she was undeterred by the unavailability of grant money to support the process. She approached Memorial Hospital, the Assitant Provost at Notre Dame, and the I.U. Center for Population Health at South Bend. All pledged resources. These were the first of a diverse core of 35 entities that have participated in plan development.

Visioning is phase two. During this phase, the community brainstorms how they would like their community to look in 10 years.

Next, the community completes four assessments, two of which look at resources. A Community Themes and Strengths Assessment looks deeply at what residents think is important and views assets that can improve public health.

A Local Public Health System Assessment identifies all of the entities that contribute to the public's health and examines the activities, competencies, and capacities of the local public health system. This assessment also looks at the process of how essential public health services are delivered.

A Community Health Status Assessment asks, "How healthy are our residents? What does the health status of our community look like?"

And finally, a Forces of Change Assessment identifies forces like legislation, technology, and other issues that affect the context in which the community and its public health system operates.

In St. Joseph County, the MAPP planners decided to focus on the top five strategic issues and their related goals. These were developed from a study of a compilation of the four MAPP assessments.

They identified the top strategic issue as governance: deciding upon a structure to achieve favorable outcomes of community health care issues. The related goal they established is "creation and implementation of an apolitical, neutral, and inclusive structure that promotes health, communicates effectively, and coordinates local policies and resources focused on improving the community's health."

In descending order, the other top four strategic issues that were identified are measurement, collaboration, health promotion, and access. The county's MAPP plan is included in a 16-page executive summary report that describes the strategic issues and goals and includes a 38-page appendix detailing the assessment reports.

Of the ongoing community involvement, Dr. Carson said, "I have enjoyed this process. It feels so proactive."



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